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Rep. Robert Bierman 579 State Office Building St. Paul, MN 55155

Rep. Bierman,

On behalf of the more than 11,000 members of the Minnesota Medical Association, I thank you for your work on HF 3786. While we all support efforts to reduce the overuse of opioids where we can, we must acknowledge that for some patients with ongoing, chronic pain, reducing their opioid use may cause them more harm than good. The MMA supports HF 3786 as a balance that continues to protect against overprescribing of opioids, while making it clear that forced tapering of these pain medications is not right for all patients.

The choice to continue opioid therapy needs to be a deliberate decision that takes into consideration the risks and benefits that come with ongoing treatment with opioids for a patient. When deciding to taper any medications, an assessment of the benefits and harms to the patient is a critical component of that decision.

Because of real and perceived directives from insurers, pharmacies, regulatory boards and state agencies, patients with severe, ongoing pain, who have been treated with long-term opioids have had their medications reduced, even when that reduction has not been in the patient's best interest. The public policy reaction to this cannot be to revert to old patterns of prescribing opioids without careful considerations. HF 3786 does not do that. It instead makes it clear that a prescriber cannot be subject to civil or criminal investigation, or termination from any program, **solely** for prescribing medications that exceed a morphine milligram equivalent (MME) threshold. It also says a pharmacist or pharmacy benefit manager cannot refuse to fill a prescription **solely** based on exceeding a predetermined MME threshold.

Your legislation also ensures that a prescriber and a patient enter into a mutually agreed treatment plan before receiving any of the protections in your bill. This patient-provider agreement must address the prescriber's and the patient's expectations, responsibilities, and rights prior to prescribing opioids, and actions to be taken should either party deviate from the agreement.

The changes in HF 3786 will provide protections to physicians and other providers who treat patients with severe, chronic pain, and more importantly ensure that patients with these conditions can continue to receive the relief they require.

The MMA is committed to ensuring (1) effective, evidence-based prescribing and treatment; (2) appropriate access to opioid therapy for patients with active cancer and patients receiving palliative or hospice care; and (3) ensuring that tapering opioid therapy is conducted in a manner that considers the risks and benefits to the patient. HF 3786 will help ensure that this type of care continues.

Sincerely,

Randy Rice, MD

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President, Minnesota Medical Association